Fill	in this information t	o identify your c	ase.					
	btor 1	Scott Andre						
	btor 2 ouse, if filing)							
	· • • • • • • • • • • • • • • • • • • •	tcy Court for the	: SOUTHERN DISTRIC	CT OF MISSISSIPPI				
	se number 24-	-50606		-	_	if this is:	I filing	
0	fficial Form	1061			■ A s	supplemer	nt showing postpetition cha s of the following date: 2025	pter
S	chedule I:	Your Inc	ome					12/15
sup spo atta	oplying correct info buse. If you are sep ach a separate she	ormation. If you parated and you	are married and not filing wi	ople are filing together (Debtor 1 ng jointly, and your spouse is li ith you, do not include informat onal pages, write your name an	ving with y ion about y	ou, inclu our spou	de information about you use. If more space is need	ır ded,
1.	Fill in your employment information.			Debtor 1	1	Debtor 2 or non-filling spouse		
	If you have more than one job, attach a separate page with information about additional	•	Employment status	☐ Employed	1	☐ Employ	yed	
		Employment status	■ Not employed	I	☐ Not em	ployed		
	employers.	employers.	Occupation	Retired				
	Include part-time, self-employed wo		Employer's name					
	Occupation may i or homemaker, if		Employer's address					
			How long employed to	here?				_
Pa	rt 2: Give De	tails About Mor	nthly Income					
	imate monthly incouse unless you are		ate you file this form. If	you have nothing to report for any	line, write S	\$0 in the s	space. Include your non-filir	ng
	ou or your non-filing re space, attach a se			ombine the information for all emp	loyers for th	nat person	on the lines below. If you	need
					For Debt	or 1	For Debtor 2 or non-filing spouse	

List monthly gross wages, salary, and commissions (before all payroll 2. deductions). If not paid monthly, calculate what the monthly wage would be. Estimate and list monthly overtime pay. 3. 3. Calculate gross Income. Add line 2 + line 3.

0.00 N/A +\$ N/A 0.00 0.00 \$ N/A 4.

Schedule I: Your Income Official Form 106I page 1

Debt	tor 1	Scott Andrew Anderson	_	Ca	ase number (<i>if knov</i>	vn)	24-50	606		
			-							
				F	For Debtor 1		For I	Debtor	2 or	
				•	or Deptor 1			filing s		
	Cop	by line 4 here	4.	9	0.0	00	\$		N/A	-
_										-
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	5a.				\$		N/A	_
	5b.	Mandatory contributions for retirement plans	5b.				\$		N/A	_
	5c.	Voluntary contributions for retirement plans	5c.				\$		N/A	_
	5d. 5e.	Required repayments of retirement fund loans Insurance	5d. 5e.				\$		N/A	_
	5e. 5f.	Domestic support obligations	5e. 5f.	. 4			\$ 		N/A N/A	-
	5g.	Union dues	5g.				\$		N/A	-
	5h.	Other deductions. Specify:	5h.			00			N/A	_
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$			\$		N/A	_
				•			· —			-
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	0.0	<u> </u>	\$		N/A	=
8.		all other income regularly received:								
	8a.	Net income from rental property and from operating a business, profession, or farm								
		Attach a statement for each property and business showing gross								
		receipts, ordinary and necessary business expenses, and the total	•				•			
	Oh	monthly net income. Interest and dividends	8a.				\$		N/A	_
	8b. 8c.	Family support payments that you, a non-filing spouse, or a dependent	8b.	. 4	0.0	<i>J</i> U	<u> </u>		N/A	-
	oc.	regularly receive								
		Include alimony, spousal support, child support, maintenance, divorce								
		settlement, and property settlement.	8c.				\$		N/A	_
	8d.	Unemployment compensation	8d.				\$		N/A	
	8e.	Social Security	8e.	. \$	1,773.0	00	\$		N/A	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance								
		that you receive, such as food stamps (benefits under the Supplemental								
		Nutrition Assistance Program) or housing subsidies.								
	_	Specify:	_ 8f.	9			\$		N/A	_
	8g.	Pension or retirement income	8g.						N/A	-
	8h.	Other monthly income. Specify: VA Disabiliy	_ 8h.	+ \$	175.5	<u> </u>	+ \$		N/A	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	5,527.2	23	\$		N/A	4
		•	_							₫
10.	Cal	culate monthly income. Add line 7 + line 9.	10.	\$	5,527.23 +	\$		N/A	= \$	5,527.23
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		· —	0,021120	· -			-	0,021120
11	Stat	te all other regular contributions to the expenses that you list in Schedule	., _							'
		ude contributions from an unmarried partner, members of your household, your		nder	nts, your roomm	ates	s, and			
		er friends or relatives.	·							
	_	not include any amounts already included in lines 2-10 or amounts that are not	availa	ble t	to pay expenses	s list	ed in So			0.00
	Spe	cify:					_	11.		0.00
12.	Add	I the amount in the last column of line 10 to the amount in line 11. The res	ult is t	the o	combined month	ılv ir	ncome.			
		e that amount on the Summary of Schedules and Statistical Summary of Certain								E E07 00
	app	lies						12.	\$	5,527.23
								L	Combi	ned
40	_		•						monthl	y income
13.	ַ סע	you expect an increase or decrease within the year after you file this form	•							
		No.								
		Yes. Explain:								

Fill	in this information to identify your case:									
Deb	btor 1 Scott Andrew Anderson	Ch	eck if this is:							
		_ _	An amended filing							
Deb	otor 2			ving postpetition chapter						
(Sp	ouse, if filing)	_ _	13 expenses as of	the following date:						
Unit	ited States Bankruptcy Court for the: SOUTHERN DISTRICT OF MISSISSIPPI		5/01/2025 MM / DD / YYYY							
	· ,	_	WIWI7 DD 7 TTTT							
1	se number <u>24-50606</u> (nown)									
0	fficial Form 106J									
S	chedule J: Your Expenses			12/15						
info	as complete and accurate as possible. If two married people are filing toget ormation. If more space is needed, attach another sheet to this form. On the mber (if known). Answer every question.									
Par 1.	rt 1: Describe Your Household Is this a joint case?									
٠.	•									
	No. Go to line 2.									
	☐ Yes. Does Debtor 2 live in a separate household?									
	☐ No ☐ Yes. Debtor 2 must file Official Form 106J-2, <i>Expenses for Separate</i>	Household of De	ebtor 2							
_		77000077070 01 20								
2.	Do you have dependents? ■ No									
	Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent Dependent Debtor 1 or	's relationship to Debtor 2	Dependent's age	Does dependent live with you?						
	Do not state the			□ No						
	dependents names.			☐ Yes						
				□ No						
				☐ Yes						
				□ No						
				— · · · ·						
			<u> </u>	Yes						
				□ No						
2	De vising symposon in allude			☐ Yes						
3.	Do your expenses include expenses of people other than yourself and your dependents?									
Est	t 2: Estimate Your Ongoing Monthly Expenses timate your expenses as of your bankruptcy filing date unless you are using penses as of a date after the bankruptcy is filed. If this is a supplemental Sciplicable date.	this form as a s hedule J, check	supplement in a Cha the box at the top o	apter 13 case to report f the form and fill in the						
the	clude expenses paid for with non-cash government assistance if you know evalue of such assistance and have included it on <i>Schedule I: Your Income</i> fficial Form 106I.)		Your exp	enses						
		_								
4.	The rental or home ownership expenses for your residence. Include first me payments and any rent for the ground or lot.	ortgage 4.	\$	1,219.00						
	If not included in line 4:									
	4a. Real estate taxes	4a.	\$	0.00						
	4b. Property, homeowner's, or renter's insurance	4b.	\$	41.00						
	4c. Home maintenance, repair, and upkeep expenses	4c.	\$	0.00						
	4d. Homeowner's association or condominium dues	4d.	\$	0.00						
5	Additional mortgage payments for your residence, such as home equity load	ns 5	\$	0.00						

Debtor 1	Scott Andrew Anderson	Case number	(if known)	24-50606			
6. Uti l	ities:						
6a.	Electricity, heat, natural gas	6a. \$		240.00			
6b.	Water, sewer, garbage collection	6b. \$		75.00			
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c. \$		330.00			
6d.	Other. Specify:	6d. \$		0.00			
	od and housekeeping supplies	7. \$		380.00			
	Idcare and children's education costs	8. \$		0.00			
_	thing, laundry, and dry cleaning	9. \$		60.00			
	sonal care products and services	10. \$		40.00			
	dical and dental expenses	10. \$	-				
	•	П. Ф		50.00			
	nsportation. Include gas, maintenance, bus or train fare. not include car payments.	12. \$		200.00			
	ertainment, clubs, recreation, newspapers, magazines, and books	13. \$		0.00			
	aritable contributions and religious donations	14. \$		0.00			
	urance.	ι-τ. ψ		0.00			
	not include insurance deducted from your pay or included in lines 4 or 20.						
	. Life insurance	15a. \$		0.00			
	. Health insurance	15b. \$		0.00			
	. Vehicle insurance	15c. \$		214.00			
	. Other insurance. Specify:	15d. \$		0.00			
	es. Do not include taxes deducted from your pay or included in lines 4 or 20.	13u. ψ		0.00			
	est bo not include taxes deducted from your pay or included in lines 4 or 20.	16. \$		0.00			
	tallment or lease payments:			0.00			
	. Car payments for Vehicle 1	17a. \$		0.00			
	. Car payments for Vehicle 2	17b. \$		0.00			
	Other. Specify:	17c. \$		0.00			
	. Other. Specify:	17d. \$		0.00			
	ir payments of alimony, maintenance, and support that you did not report as		-	0.00			
	lucted from your pay on line 5, Schedule I, Your Income (Official Form 106I).			0.00			
	er payments you make to support others who do not live with you.	\$		0.00			
	ecify:	19.					
	er real property expenses not included in lines 4 or 5 of this form or on Sch	edule I: Your	Income.				
20a	. Mortgages on other property	20a. \$		0.00			
	. Real estate taxes	20b. \$		0.00			
200	. Property, homeowner's, or renter's insurance	20c. \$		0.00			
	. Maintenance, repair, and upkeep expenses	20d. \$		0.00			
	. Homeowner's association or condominium dues	20e. \$		0.00			
	er: Specify: SSI not included pursuant to Beaulieu, Jr. v. Ragos	21. +	s	1,773.00			
			*	1,775.00			
	culate your monthly expenses						
	. Add lines 4 through 21.		\$	4,622.00			
22b	. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$				
220	. Add line 22a and 22b. The result is your monthly expenses.		\$	4,622.00			
				.,			
	culate your monthly net income.						
	. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$		5,527.23			
23b	. Copy your monthly expenses from line 22c above.	23b	j	4,622.00			
230	Subtract your monthly expenses from your monthly income.	23c. \$		905.23			
	The result is your monthly net income.	230. [Ψ		300.20			
	you expect an increase or decrease in your expenses within the year after your expenses within the year after your expenses.			anno or dogrando bosquino			
	For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because o modification to the terms of your mortgage?						
	, 5 5						
\Box	Voc Explain here:						

Fill in this infori	mation to identify your	case:					
Debtor 1	Scott Andrew An						
Debter 2	First Name	Middle Name	Las	Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Las	Name			
United States Ba	ankruptcy Court for the:	SOUTHERN DISTRICT	OF MISSIS	SIPPI			
Case number	24-50606						
(if known)						Check if this is amended filing	
ou must file thi obtaining money rears, or both. 1	s form whenever you fi	n connection with a bank	or amende	d schedules. Ma	ıking a false stat	ement, concealing prope 00, or imprisonment for u	
Did you pa	y or agree to pay some	one who is NOT an attor	ney to help	you fill out bank	ruptcy forms?		
■ No							
☐ Yes. N	Name of person					kruptcy Petition Preparer's n, and Signature (Official Fo	
	lty of perjury, I declare e true and correct.	that I have read the sum	mary and s	chedules filed wi	ith this declarati	on and	
X /s/ Sco	ott Andrew Anderson	ı	х				
Scott A	Andrew Anderson re of Debtor 1			Signature of Deb	otor 2		
Date /	April 30, 2025			Date			